



# Promoting Equality in African Schools

Realising the Potential in People

PEAS, 2 Seething Lane, London, EC3N 4AT

Registered Charity No: 1126550

email: info@peas.org.uk

www.peas.org.uk

phone: +44 (0)20 7481 7766

## GOT MATAR Community Development Group *in association with PEAS* Donation & Gift Aid Declaration Form

Personal Details	
Name:	Telephone:
Address:	Postcode:
Email:	

### EITHER:

One-off Donations
I would like to donate £ / US\$ / \$Can / € _____ to the GOT MATAR Community Development Group. <i>Please tick relevant box:</i>
<input type="checkbox"/> I enclose a cheque (payable to PEAS)
<input type="checkbox"/> I am instructing my bank to make a transfer via BACS to PEAS on my behalf. (from UK banks only)
<input type="checkbox"/> I have made an e-transfer to PEAS. (from banks outside UK - use SWIFT or IBAN)
<small>Details for PEAS BACS transfer: Barclays Bank Plc (Victoria St. Westminster) / Sort Code: 20-94-48 / Acc No: 10358940 / Acc Name: PEAS E-transfers: SWIFT/BIC: BARCGB22 IBAN: GB97 BARC 2094 4810 3589 40</small>

### OR:

Regular Donations: Standing Order Mandate		
	<i>Account to be debited</i>	<i>Beneficiary Account</i>
Bank & Branch:		Barclays Bank Plc, Victoria St, Westminster
Sort Code:		2 0 - 9 4 - 4 8
Account No:		1 0 3 5 8 9 4 0
Account Name:		PEAS
Date of first payment:	Date of last payment:	OR <input type="checkbox"/> Continue until further notice (please tick)
Amount of first and usual payment:	£ / US\$ / \$Can / €* _____ (*delete as appropriate)	To be paid: (please tick)
Amount in words:		<input type="checkbox"/> Annually <input type="checkbox"/> Other (please specify)
Signed:	Date:	

Purpose of Donation
The purpose of my donation is to finance: <input type="checkbox"/> School Construction: £/\$/€ _____ <input type="checkbox"/> Bursaries: £/\$/€ _____
Note any detailed requirements re bursaries: (e.g. no. of bursaries and period in years / for male or female students, etc)

Gift Aid Declaration – for UK taxpayers	
I would like PEAS to treat the donation to GOT MATAR of £ _____ which I made on ___ / ___ / ___ as Gift Aid donations.	
I would like all future donations I make to be treated as Gift Aid donations. (Please tick box if appropriate) <input type="checkbox"/>	
Signed:	Date:

**Please return the completed form to PEAS at the address at the top of the page.**

Your support is much appreciated. See the Got Matar website for progress updates ([www.gotmatar.org](http://www.gotmatar.org)) or contact [info@gotmatar.org](mailto:info@gotmatar.org)